



ITW /

PATENTS

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Albert M. David

Serial No.: 10/603,518 GAU: 2677

Filed: June 25, 2003 Examiner: Michael PERVAN

For: LAMINATED TOUCH SCREEN

PETITION FOR EXTENSION OF TIME

Mail Stop Fee Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Sir:

It is respectfully requested that the above-identified Applicant be granted an extension of time for the period of two (2) months from April 24, 2006 to June 26, 2006, in the above-identified application to respond to the outstanding Office Action.

Enclosed please find a check in the amount of \$225.00 for the extension fee. Any deficiency or overpayment should be charged or credited to Deposit Account No. 08-1650.

06/30/2006 EAREGAY1 00000027 10603518

03 FC:2252

225.00 OP

Date

June 26, 2006

Respectfully submitted,

Albert M. DAVID

By: Michael O. Sturm

Michael O. Sturm
Reg. No. 26,078

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I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to : Commissioner of Patents and Trademarks, Washington, D.C. 20231, on 06-26-06

Albert M. Ottis

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Albert M. David

Serial No. 10/603,518

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For: LAMINATED TOUCH SCREEN



Group Art Unit 2677

Examiner: Michael PERVAN

Mail Stop Amendment

Commissioner for Patents

P.O. Box 1450

Alexandria, VA 22313-1450

Transmitted herewith is an amendment for this application.

2. Applicant is

- a small entity - verified statement:
- attached already filed.
- other than a small entity.
- No additional fee for claims is required.

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Michael O. Sturm

The fee for claims (37 CFR 1.16(b)-(d) has been calculated as shown below:

	COL. 1		COL. 2	COL. 3	SMALL ENTITY	OTHER THAN A SMALL ENTITY
	Claims Remaining After Amendment		Highest No. Previously Paid For	Present Extra	Rate	Addit Fee
Total	37*	Minus	35**	2	x \$ 25	\$50
Independent	6*	Minus	4***	2	x \$100	\$200
<input type="checkbox"/> First presentation of Multiple Dep. Claim					x \$180	\$0
					TOTAL	\$250
					OR	
						Rate
						\$18
						\$0
						\$86
						\$0
						\$270
						\$0
					OR	
						TOTAL

* If the entry in Col. 1 is less than entry in Col. 2, write "O" in Col. 3.

** If the "Highest No. Previously Paid For" IN THIS SPACE is less than 20, enter "20".

*** If the "Highest No. Previously Paid For" IN THIS SPACE is less than 3, enter "3".

The "Highest No. Previously Paid For" (Total or indep.) is the highest number found in the appropriate box in Col. 1 of a prior amendment or the number of claims originally filed.

- Charge Account No. 08-1650 the sum of \$_____ A duplicate of this transmittal is attached.
- A check in the amount of \$ 250 is enclosed.
- The Commissioner is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 08-1650.
- Any filing fees under 37 CFR 1.16 for the presentation of extra claims.
- Any patent application processing fees under 37 CFR 1.17.

Michael O. Sturm

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June 26, 2006

Date